PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

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DECLARATION FOR UTILITY OR	Attorney Docket Number First Named Inventor	US020624 Kim Hansen			
DESIGN PATENT APPLICATION	COMPLETE IF KNOWN				
(37 CFR 1.63)	Application Number	1			
☑Declaration ☐Declaration Submitted OR Submitted after Initial	Filing Date				
With Initial Filing (surcharge Filing (37 CFR 1.16 (e)) required)	Group Art Unit				
	Examiner Name				

As a below named inventor, I hereby declare that:						
My residence, post office	e address, and citizenship a	are as stated below next to	o my name.			
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
INTERACTIVE AUTOMATIC EXTERNAL DEFIBRILLATOR PROVIDING ATTACHMENT GUIDANCE TO OPERATOR						
the specification of which (Title of the Invention)						
☑ is attached hereto						
OR						
□ was filed on (MM/DD/YYYY) as United States Application Number or PCT International						
Application Number and was amended on (MM/DD/YYYY) (if applicable).						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Cop	•	
Number(s)	Country	(IMMI/DU/TTTT) Country	Not Claimed	YES	NO	
Additional foreign applicati	ion numbers are listed on a sur	polemental priority data shee	t PTO/SB/02B attac	ched hereto:		

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Nu or Bar Code L			24737*		OR	Σ	Correspondance address below
Philips Electronics North America Corporation							
Name							
580 White Plains Rd.			•				
Address	1,54					0504	5400
Tarrytown City		NY 10591-5190			-5190		
U.S.A.		'	(914)332-0222		i i	14) 332-0615	
Country			eleph	-			ax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor							
Given Name Kim Family Name HANSEN or Surname				٧			
Inventor's Signature					Date	3/.	by3
Renton	WA			USA			USA
Residence: City	State	State		Country			Citizenship
18142 147 th Avenue SE							
Mailing Address				, ,			
Renton	WA	WA 98058 USA		USA			
City	State	1		Zip		- 1	Country
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor							
Given Name Thomas D. (first and middle [if any])				ily Nam urname		TER	t
Inventor's Signature					Date /	MA	R20 2003
Bothell	WA			USA	·		USA
Residence: City	State	•		Coun	try		Citizenship
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Mailing Address			٠,٠				<u> </u>
Bothell	WA		3	98021			USA
City	State	•		Zip			Country
Additional inventors are being named on the 1			onal Inv	•	sheet(s) P		

Please type a plus sign (+) inside this box —

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u>

Name of Additional Joint Inventor, if any:	y: ☐ A petition has been filed for this unsigned inventor					
Given Name (first and middle	e (if anyl)	Family Name or Sumane				
Kurt V.		FISCHER				
Inventor's Signature		Date 3/20/03				
Residence: City Lynnwood	State WA	Country USA Citizenship				
Mailing Address 13825 Beverly Park Road						
Mailing Address						
City Lynnwood	.State	98037 USA				
Name of Additional Joint Inventor, if any:						
Given Name (first and middle	e [if any])	any]) Family Name or Surname				
James Adkins	Froman					
Inventor's Jems Adkin	r's Jems Adkin howan					
Residence: City Issaquah	State WA	Country USA Citizenship USA				
Mailing Address 23944 SE 41st Street						
Malling Address						
City Issaquah	state WA	Zip 98029 Country USA				
Name of Additional Joint Inventor, if any:						
Given Name (first and middle [if any]) Family Name or Sumame						
Douglas Michael / Denney						
orventor's Signature Weight Manuel Date 20 Mar. 03						
Residence: City Sammamish	State WA	Country USA	Citizenship USA			
Mailing Address 20523 NE 15 th Street						
Mailing Address						
City Sammimish	State WA	Zip 98074 Country USA				

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PTO/5B/50 (11-04)

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POWER OF ATTORNEY TO PROBECUTE APPLICATIONS BEFORE THE HISPTO I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b) I hereby appoint: Practitioners associated with the Customer Number: 28159 Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): Registration Name Registration Number Number as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned anly to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: 28159 X. The address associated with Customer Number: OR Firm or Individual Name Address Zlp State City Country Fax Telephone Assignee Name and Address: KONINKLIJKE PHILIPS ELECTRONICS N.V. Groenewoudseweg 1 5621 BA Eindhoven, The Netherlands A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignes, and must identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The dividual whose single and title is supplied below is authorized to act on behalf of the assignee Dete 02 FEB 2005 Signature 333-9637 Telephone (914) Michael E Marion Name Representative Title Authorized

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to fife (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any to comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

JC12 Rec'd PCT/PTC 13 APR 2005

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STATEMENT UNDER 37 CFR 3.73(b)
Applicant/Patent Owner: KONINKLUKE PHILIPS ELECTRONICS N.V.
Application No./Patent No.: Filed/Issue Date:
Entitled: INTERACTIVE AUTOMATIC EXTERNAL DEFIBRILLATOR PROVIDING ATTACHMENT GUIDANCE TO OPERATOR
Koninlkijke Philips Electronics N.V. , a corporation (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)
states that it is: 1. the assignee of the entire right, title, and interest; or
2. an assignee of less than the entire right, title and interest. The extent (by percentage) of its ownership interest is%
in the patent application/patent identified above by virtue of either:
A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel, Frame, or for which a copy thereof is attached.
OR B. A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:
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Additional documents in the chain of title are listed on a supplemental sheet.
Copies of assignments or other documents in the chain of title are attached. [NOTE: A separate copy (<i>i.e.</i> , a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]
The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.
WB In Ulas
Signature Date
W. Brinton Yorks, Jr. Reg. #28,923 425-487-7152
Printed or Typed Name Telephone Number
Authorized Appointed Practitioner of Assignee Title

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